# 2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 729149

Entity Name: KENDALL ACRES WEST CONDOMINIUM ASSOCIATION, INC.

# **Current Principal Place of Business:**

C\O COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE MIAMI, FL 33186

# **Current Mailing Address:**

C\O COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE MIAMI, FL 33186

### FEI Number: 59-1531464

### Name and Address of Current Registered Agent:

LAW OFFICE OF STUART J. NUNEZ, P.A. 10691 N. KENDALL DRIVE SUITE 206 MIAMI, FL 33176 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

#### Officer/Director Detail :

	Title	PD	Title	VPD
	Name	WEISSBERG, CRAIG	Name	PUGA, EUNICE
	Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE	Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE
	City-State-Zip:	MIAMI FL 33186	City-State-Zip:	MIAMI FL 33186
	Title	D	Title	TD
	Name	BELTRAN, JOSE	Name	RICCARDI, TITINA
	Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE	Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE
	City-State-Zip:	MIAMI FL 33186	City-State-Zip:	MIAMI FL 33186
		-		
	Title	D	Title	SD
	Name	KELLY, PATRICIA	Name	MILAN, LORRAINE
	Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE	Address	CO COURTESY PROPERTY MANAGEMENT 13250 SW 135 AVENUE
	City-State-Zip:	MIAMI FL 33186	City-State-Zip:	MIAMI FL 33186
	Title	D	Title	D
	Name	CABRERA, KELLY	Name	SAN MILIAN, GERARDO
	Address	CO COURTESY PROPERTY MANAGEMENT	Address	CO COURTESY PROPERTY MANAGEMENT
		13250 SW 135 AVENUE		13250 SW 135 AVENUE
	City-State-Zip:	13250 SW 135 AVENUE MIAMI FL 33186	City-State-Zip:	13250 SW 135 AVENUE MIAMI FL 33186

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: CRAIG WEISSBERG

Certificate of Status Desired: Yes

Date

09/07/2023

FILED Sep 07, 2023 Secretary of State 1820389819CC